



Taylor, Hillman, Shelby & Asdell
La Paloma Corporate Center
3573 East Sunrise Dr., Ste 125
Tucson, AZ 85718

DATE/TIME: 11/03/06 1200
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General Durable Power of Attorney

KNOW ALL MEN BY THESE PRESENTS, that I, FRED FEELEY, now residing at 65850 East Rocky Path Drive, Tucson, Arizona 85739, intending to create a power of attorney, do hereby nominate, constitute, and appoint my wife, BARBARA FEELEY, now residing at 65850 East Rocky Path Drive, Tucson, Arizona 85739, as my true and lawful attorney in fact (my Agent). If BARBARA FEELEY is unable or unwilling to serve, I do hereby nominate, constitute, and appoint my brother, RICHARD FEELEY now residing at 3630 North Highway 185, Las Cruces, New Mexico 88005, as my true and lawful attorney in fact (my Agent). If RICHARD FEELEY is unable or unwilling to serve, I do hereby nominate, constitute, and appoint my wife's daughter, JULIE LAMOREAUX, now residing at 45 Henry Street, Burlington, Vermont 05401, as my true and lawful attorney in fact (my Agent). My Agent shall act for me and in my name, place and stead, and for my use and benefit for the following uses and purposes:

I. Financial Provisions

FD7 W Chw To ask, demand, sue for, recover, collect and receive all such sums of money, debts, dues, accounts, legacies, bequests, interest, dividends, annuities, employee benefits, insurance benefits and demands whatsoever as are now or shall hereafter become due, owing, payable or belonging to me and have, use and take all lawful ways and means in my name or otherwise for the recovery thereof, by attachments, arrests, distress, or otherwise, and to compromise and agree for the same and give acquittances or other sufficient discharges and releases;

FD7 W Chw For me and in my name, to make, execute and deliver, to bargain, contract, agree for, purchase, receive and take lands and all or any interest in property, and accept the possession of all kinds, and all or any interest in property, and all deeds and other assurances, in the law therefor, and to lease, let, demise, bargain, sell, release, convey, mortgage, and hypothecate lands, and all or any interest in property, upon such terms and conditions and under such covenants as my Agent shall think fit;

FD7 W Chw Also to bargain and agree for, buy, sell, mortgage, hypothecate and

in any and every way and manner deal in and with goods, wares and merchandise, choses in action, and other property in possession or in action, and to make, do and transact all and every kind of business of whatsoever nature and kind;

707 W ChW And also for me and in my name and as my act and deed, to sign, seal, execute, deliver and acknowledge such deeds, leases, mortgages, deeds of trust, hypothecations, bills, bonds, notes, receipts, evidence of debt, releases and satisfaction of mortgage, judgments and other debts and such other instruments in writing of whatsoever kind and nature as may be necessary or proper in the circumstances (including, but not limited to, the authority to sign for me when the property is held or will be held in joint tenancy with right of survivorship, including situations where my Agent is one of the joint tenants);

707 W ChW And also to make withdrawals from or deposits to any bank account or savings or loan account or other cash account in my name; and to enter and have free access to any safe deposit box in my name for the purpose of adding property thereto or removing property therefrom;

707 W ChW And also to sign federal and state tax returns in my stead;

707 W ChW And also to fund any revocable living trust in which I am the Trustor;

707 W ChW And also to make annual exclusion gifts, provided, however, that when a permissible beneficiary of such gifts is acting as my attorney hereunder, gifts to himself or herself in an individual capacity, whether outright or in trust, shall be limited to that amount necessary to qualify for the \$5,000/5% exemption as provided in §2514(e) of the Internal Revenue Code of 1986, as amended. Such gifts may not be made to me, my estates, or individuals to whom I have a support obligation. Such gifts may be made only to:

- a. An individual or charity to whom I have previously made a gift; or
- b. An individual or charity who is a beneficiary under my most recently executed Will or Trust (as determined by the Trustee); or
- c. An individual or charity who is the natural object of my bounty;

707 W ChW And also to make any elections and to elect to receive or defer any of my retirement plan benefits and payments, whether under a qualified pension, profit sharing, Keogh, individual retirement account, teachers' retirement plan, or any other retirement plan, either in a lump sum or in any other manner permitted by the terms of the particular retirement plan, to the extent of my interest in the plan;

707 W ChW And also, with respect to life insurance and other insurance policies and contracts, to purchase, accept, hold, and deal with as owner policies of insurance on my life, and to pay premiums, and to execute or cancel any automatic premium loan agreement with respect to any policy, and to elect or cancel any automatic premium loan provision in a life insurance policy, and to pay premiums due on any policy either from the company issuing the

policy or from any other source, and to assign any such policy as security for the loan, and to exercise any option contained in a policy with regard to any dividend or share of surplus apportioned to the policy, to reduce the amount of a policy or convert or exchange the policy, or to surrender a policy at any time for its cash value, and to elect any paid-up insurance or any extended-term insurance nonforfeiture option contained in a policy, and to sell policies at their fair market value to the insured or to anyone having an insurable interest in the policy, and to exercise any other right, option, or benefit contained in a policy or permitted by the insurance company issuing that policy, and to collect the proceeds from any policy;

707 w Chu Giving and granting unto my said attorney in fact full power and authority to do and perform every act necessary, requisite or proper to be done in and about the premises as fully as I might or could do if personally present, with the full power of substitution and revocation, hereby ratifying and confirming all that my said attorney shall lawfully do or cause to be done by virtue hereof.

707 w Chu This Power of Attorney shall not be affected by disability of the principal.

707 w Chu In executing this Power of Attorney, I acknowledge that any and all of the above provisions may not be in my best interest or may benefit my Agent. For this reason, I have separately initialed all of the provisions of this Power of Attorney and have instructed my witnesses to do the same.

707 w Chu By executing this Power of Attorney, I hereby revoke any and all Powers of Attorney I have previously executed.

II. HIPAA Release Authority

707 w Chu I intend for my agent to be treated as I would be with respect to my rights regarding the use and disclosure of my individually identifiable health (including mental health) information or other medical records. This release authority applies to any information governed by the Health Insurance Portability and Accountability Act of 1996 (aka HIPAA), 42 USC 1320d and 45 CFR 160-164. I authorize any physician, health-care professional, dentist, health plan, hospital, clinic, laboratory, pharmacy or other covered health-care provider, any insurance company and the Medical Information Bureau Inc. or other health-care clearinghouse that has provided treatment or services to me, or that has paid for or is seeking payment from me for such services, to give, disclose, and release to my agent, without restriction, all of my individually identifiable health information regarding any past, present or future medical or mental health condition, including all information relating to the diagnosis and treatment of HIV/AIDS, sexually transmitted diseases, mental illness, and drug or alcohol abuse. The authority given my agent shall supersede any prior agreement that I may have made with my health-care providers to restrict access to or disclosure of my individually identifiable health information. The authority given my agent has no expiration date and shall expire only in the

event that I revoke the authority in writing and deliver it to my health-care provider.

IN WITNESS WHEREOF, I have hereunto signed my name this twelfth day of October, 2006.

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Fred Feeley
FRED FEELEY

The foregoing instrument was on the above date signed, published, and declared by FRED FEELEY, the Principal, to be his General Durable Power of Attorney in the presence of each of us, the undersigned, who thereupon, at his request and direction, and in his presence, and the presence of each other, have subscribed our names as attesting witnesses this twelfth day of October, 2006.

W

Roger W. Taylor
ROGER W. TAYLOR
3573 East Sunrise Drive
Suite 125
Tucson, Arizona 85718

CLW

Candace L. Wainscott
CANDACE L. WAINSCOTT
3573 East Sunrise Drive
Suite 125
Tucson, Arizona 85718

I, FRED FEELEY, the Principal, intending to create a General Durable Power of Attorney, sign my name to this instrument this twelfth day of October, 2006, and being first duly sworn, do hereby declare to the undersigned authority that I sign and execute this instrument as my General Durable Power of Attorney and that I sign it willingly, that I execute it as my free and voluntary act for the purposes therein expressed, and that I am eighteen (18) years of age or older, of sound mind, and under no constraint or undue influence.

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Fred Feeley
FRED FEELEY

We, ROGER W. TAYLOR and CANDACE L. WAINSCOTT, the witnesses, sign our names to this instrument, being first duly sworn, and do hereby declare to the undersigned authority that FRED FEELEY signs and executes this instrument as his General Durable Power of Attorney and that he signs it willingly, and that each of us, in the presence and hearing of

FRED FEELEY, hereby signs this General Durable Power of Attorney as witness to his signing, and that to the best of our knowledge FRED FEELEY is eighteen (18) years of age or older, of sound mind, and under no constraint or undue influence.

[Signature]
ROGER W. TAYLOR

[Signature]
CANDACE L. WAINSCOTT

STATE OF ARIZONA)
) SS
COUNTY OF PINAL)

SUBSCRIBED, SWORN TO AND ACKNOWLEDGED before me by FRED FEELEY, the Principal, and subscribed and sworn to before me by ROGER W. TAYLOR and CANDACE L. WAINSCOTT, witnesses, this twelfth day of October, 2006.

[Signature]
Kari C. Simpson
Notary Public

My Commission Expires:
March 29, 2009

